STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION DOA-3009 (R10/2008) S. 895.46, WIS. STATS.



BUREAU OF STATE RISK MANAGEMENT 101 E. WILSON STREET, 5<sup>TH</sup> FLOOR P. O. BOX 77008 MADISON, WI 53707-1008 (608) 266-0168

Presci	riped Burning /			nent		
Volunteer Name		Position T	itle			
Address		City			State	ZIP + 4
Daytime Phone No.	Cell Phone No.	<u> </u>		Email Address		
Emergency Contact	*,	Emergend	y Contact	Daytime Phone	Number	-
Dates of Agreement (mm/dd/ccyy)	Scheduled Hou	rs/Week	Schedul	e (e.g., every Frida Saturday, varies,	day, Wednesday through es, etc.)	
From To  Volunteer Location			<u></u>			
Name of State Agency		Site/Prog	am/Activit	y		
Address		City	*,1		State	ZIP + 4
Volunteer Supervisor Name		Title		<u>, , , , , , , , , , , , , , , , , , , </u>	Phone Number	
<ol> <li>Volunteer</li> <li>Will be under the supervision, direction</li> <li>Shall be available for scheduled service</li> <li>Understands that s/he is a volunteer a not eligible for any benefits, including V</li> <li>Understands all duties expected to be pass needed.</li> <li>Understands all work rules that are to be understands that the State agency nar</li> <li>If volunteer will be driving a State vehice Driver Vehicle Use Agreement (DOA-3 Procedures; meeting the minimum driv vehicle, will strictly follow the route des</li> <li>Shall meet, at a minimum, Wisconsin Member", and shall have completed th Verification of course completion ce</li> </ol>	e time(s) listed above and NOT an employed vorker's Compensation performed that appear the followed. The followed will provide as part of his/her a 685), receiving and using standards, receiving and using standards, receiving at the agence of Natural Resource required training to pertificates: Viewed and NOT and NOT appear to the pertificates: Viewed and NOT and NOT appear to the pertificates: Viewed and NOT appear to the pertificates to the pertificates and NOT appear t	e of the Staten. If on the Pose If no comperessigned dutinderstanding proper auty. If our continuous the staten of	e of Wiscontion Description.  sation.  es, s/he will  the statewelthorization  cribed Burn  ndard (NW  ed by (State	ption and that add l only do so after ride Fleet Driver a to drive a State v Position Standard CG sanctioned co	completing completing and Manag rehicle, an d FFT2 – I burses: I-1 esentative	ties may be added  g a Volunteer gement Policies and d, when driving a  Basic Fire Crew 100, S-190, S-130)
State Agency Named Above  1. Will provide the volunteer with a Positic Will provide training required to perform 3. Will educate volunteers on safety award 4. Will provide necessary volunteer safety 5. Will subsequently and periodically revious the entitled to all the protections provided to will review and update this Volunteer will review and update this Volunteer will be the volunteer or the State Volunteer's Signature	on Description description the agreed upon dureness in the workplary and equipment relained work performance of the State as provided by s. 895.46, Wis.	oing duties to ties. ce. red items. with the vol ed in s. 895. Stats. t an annual t	n be perform unteer. 46, Wis: St	ned. ats. As an agent (	of the Stat	e, the volunteer will nt at any time.
Authorized State Agency Representati	ve Signature				Date (mn	n/dd/ccyy)

State of Wisconsin Department of Natural Resources Risk Management - HR/DR 2421 Darwin Road Madison, WI 53704-3109

## Physical Requirements Acknowledgement Form 9100-240 (R-2/05)

Notice: All individuals who are asked to perform fireline or prescribed burn duties must complete this form before they may be authorized to assist in these duties. This applies to permanent and seasonal DNR managers who do not have fireline or prescribed burning duties in their position description. Submit completed from to DNR Safety and Risk Management at the address above. Those authorized shall re-submit this acknowledgment each calendar year and as the individual's ability to perform duties changes.

Personal information collected on this form will be provided to the Safety & Risk Management Section for the purpose of risk management and for no other purposes. Information is also accessible to requesters under Wisconsin's Open Records laws (s. 19.32 - 19.39, Wis. Stats.) and requirements.

Participani I Last Name	nformation			First				1	MI
I hereby acknowledge	owledge receip	t and full unders	Analysis for Fire standing of the phy are of any physical ments and activition	sical requir	ements and	Souvilles for the c	Junes of the		ility to
Participant Signature	gnature	٠.	r	,		Date			
DNR Emplo Last Name	yee Oversee	ing Fireline c	or Prescribed Bi	ırn Duties First	(Incident	Commander)			MI
	○ Wildlife	O Forestry	O Endangered	Resources	Region				

## PHYSICAL REQUIREMENTS

Indicate the % of time during a typical work day that each of the following strength requirements would be required.

Activity	Not Required	Less than 25%	25 to 49%	50 to 74%	75% or more
Sedentary Work: Exerting up to 10 pounds of force occasionally* and/or a negligible amount of force frequently**.			X		
Light Work: Exerting up to 20 pounds of force occasionally* and/or up to 10 pounds of force frequently**.	§**	X			
Medium Work: Exerting 20-50 pounds of force occasionally* and/or 25-50 pounds of force frequently**.	-		X		;
Heavy Work: Exerting 50-100 pounds of force occasionally* and/or 25-50 pounds of force frequently**.		X		-	
Very Heavy Work: Exerting in excess of 100 pounds of force occasionally* and/or in excess of 50 pounds of force frequently**.	The state of the s	х		To the state of th	

<sup>\*</sup> occasionally - activity of conditions exist up to 1/3 of the time.

## PHYSICAL ACTIVITY

Indicate the % of time during a typical work day that each of the following physical activities are performed.

Activity	Not Required	Less than 25%	25 to 49%	50 to 74%	75% or more
Bending at the Waist: Bending body downward and forward by bending the spine at the waist.				X	
Kneeling: Bending the legs at the knee to come to rest on the knee or knees.		X			
Crouching: Bending the body downward and forward by bending the legs and spine.			X		
Crawling: Moving about on the hands and knees or hands and feet.		х			
Climbing: Ascending or descending ladders, stairs, ramps, and the like, using the feet and legs and/or hands and arms.		X			
Balancing: Maintaining body equilibrium to prevent falling when walking, standing, crouching, on narrow, slippery, or erratically moving surfaces. This factor exceeds that need for ordinary maintenance of body equilibrium.				A DESCRIPTION OF THE PROPERTY	X

<sup>\*\*</sup>frequently - activity or conditions exist from 1/3 to 2/3 of the time.

	Not	Less than			75% or
Activity	Required	25%	25 to 49%	50 to 74%	more
Lifting: Raising or lowering an object from					I
one level to another. This includes floor to	*	X			
waist, waist to chest and above the shoulders					
lifting.				`	
Carrying: Transporting an object, usually					1
holding it in the hands of arms on the				X .	1
shoulder.	•				
Pushing: using upper extremities to press					
against with steady force in order to thrust		X			•
forward, downward or outward.	*	•	•	·	
Pulling: Using upper extremities to exert					
force in order to draw, drag, haul or tug		X			
objects in a sustained motion.					,
Reaching: Extending the hands and arms in					
any direction.			X	·	
Handling: Seizing, holding, grasping,	-				
turning, or otherwise working with the hand or		,			X
hands					
Fingering: Picking, pinching, or otherwise		9, 4			
working with fingers primarily.		,			X
Sitting: (Particularly for long periods of					
time.)		X			
Standing: Particularly for long periods of					
time.			X		
Talking: Expressing or exchanging ideas by				,	
means of the spoken word.					X
Hearing: Perceiving the nature of sounds by					
the ear with or without correction.			·		X
Seeing: Obtaining impressions through the					
eyes of the shape, size, distance, motion,			}		
color, or other characteristics of object.	,				X
X Clarity of vision at 20 feet or more					
$\overline{X}$ Clarity of vision at 20 inches or less			]		j
X Ability to identify and distinguish colors.					,
Walking: Moving on foot					X

Appendix C: Cooper Institute Assessment

Mandatory Event	Pass Point
1.5 Mile Run	17 min 35 sec
300 meter	79 seconds
Vertical Jump	14"
1RM Bench	58% of body weight
Sit ups	26
Push Ups	18

Date: 01-10-2013 Page 10 of 10